			Dec	8 '04 12:2	5 P.U.	2703
State of Connecticu	it lic Sufety / Division of State		AC	CCIDENT INF	ORMATI	ON SUMMARY
			Number, DPS-04061274			Notations:
Investigating Trooper: _K1.	ck : #_		12-08-04	Time: <u>03</u> 03		Weather: Warry Lane of Direction of Travel:
No. & Type of Veh's Involved	d: <u>Tractor Trailer</u> (Passenger Car, Truck, E	Bus, Etc.)		strian, Pole, Bridge A		N S E W
Town / City: Milford		Location	of Accident 195. E	/6 exit 39B off	IND	
Utility Pole Name & Number				Oth	er (Specify): _	
oper#1: Fisher, John	100000		Oper #2:			
DQ5.	T-1	⊠.M □F	DOB:		Gender:	OM OF
Address: 17 North Circ			Address:			_/
Town: Aberdeen	State: N	Zip:			State:	Zip:
Oper. Lic. # F46504076105		_ State; <u>N</u>	Oper. Lic, #	. 02	Type:	State:
Owner#1: SAR/ Matter	eson Transport, RF I	xe:	Owner #2:		/	
Address: SME/ 19A Cro			Address:	- 45 m	/_	
Registration Plate: A TOO'N	/ 'ISZZ7?' State: _1	U/W	Registration Plat	te:	_/ State:	- 1444 -
Make: HE / TIL	Model: COV. / TRA.	Year 97/ 98	Make:	Model.		Year:
VIN: 2FUYDWAE3VAE51444	4 / 1TTF40205N105681		VIN:			
Scatbelt(s): Ayes No Insurance Company: Insurance Policy #: Injuries: MITOT EDUSCE Vehicle Damage: PRESE Vehicle Towed: No Yes Occupant(s): [Name / DOB	e and cute, not admit to all mides, cab an a. Robert's Towing	ited to Mosaita al trailer	Vehicle Damage: Vehicle Towed: [any:		Veh 1
Sear tacsener in ale						
Tyler Fisher (65-66	-97) SME ADDRESS		1			
Oper #3:					_	
DOB:		1 M 🖂			Gender:	□ M ØF
Address:			Address:			-/-
Town:	State:	Zip:	Toyvn:		State:	_ /Zip:
Oper. Lic. #	Type:	State:	Oper. Lic. #		_Туро:	State:
Owner #3;	/_		Owner #4:		/	
Address:	/_		Address:		/_	
Registration Plate:	State:		Registration Plate	e:	State:	
Make:	Model:	Year:	Make:	Model:	/	Year:
VIN:			VIN:	/		
Seatbelt(s): Tes No Insurance Company:	Alrbag: Yes(Deployed DY [DN) □No □N/A	Seatbelt(s): TYes Insurance Compa	,	Yes (Deployed)	DY DN) DNO DNA

Insurance Policy #:

Vehicle Damage:

Vehicle Tower. No Yes,
Occupant(s). [Name / DOB / Address / Position in Veh.]

Injuries:

Vehicle Towed: No Yes,
Occupant(s): [Name / DOB / Address / Position in Veh]

Insurance Policy #:

Vehicle Damage:

Injuries:

Vehicle #1 was traveling I95 eastbound on the exit 39B off ramp in the City of Milford when it was involved in an accident. The particular ramp is curved to the right with a slight downhill slope. At the time of the accident, the roadway was wet, it was raining, visibility was slightly foggy, and traffic was light. Vehicle #1 had entered the ramp which is only one lane when it's operator admitted to falling asleep closing his eyes for a second. The operator stated when he reopened his eyes, he realized he was in a position that would prevent him from safely negotiating the ramp. The operator stated he then cut the wheel to the right attempting to recover, but must have overcorrected and rolled over on to his left side. No other vehicles had involved, and the whole of vehicle #1's load, aluminum beams came apart from the trailer spilling onto the grass gore area. No witnesses to the accident, and minor injuries suffered to both the driver and his only passenger, his son.